

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Divisional
Suggested classification::	None
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	Yes
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	None
Title::	METHODS OF USE OF RECOMBINANT VASOACTIVE PROTEIN FROM SALIVARY GLAND OF THE BLACK FLY
Attorney Docket Number::	35721/273617 (5721-4D)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	None
Total Drawing Sheets::	1
Small Entity::	Yes
Petition Included?::	No
Petition Type::	None
Licensed US Govt. Agency::	No
Contract or Grant Numbers::	None
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mary S.
Family Name:: Cupp
Name Suffix::
City of Residence:: Auburn
State or Province of Residence:: AL
Country of Residence:: US
Street of mailing address:: 740 Burke Place
City of mailing address:: Auburn
State or Province of mailing address:: AL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 36830

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jose M.C.
Family Name:: Ribeiro
Name Suffix::
City of Residence:: Rockville
State or Province of Residence:: MD
Country of Residence:: US
Street of mailing address:: 1339 Templeton Place
City of mailing address:: Rockville
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20852

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Eddie W.
 Family Name:: Cupp
 Name Suffix::
 City of Residence:: Auburn
 State or Province of Residence:: AL
 Country of Residence:: US
 Street of mailing address:: 740 Burke Place
 City of mailing address:: Auburn
 State or Province of mailing address:: AL
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 36830

Correspondence Information

Correspondence Customer Number:: 00826

Representative Information

Representative Customer Number:: 00826

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	10/218,699	08/14/02
	Division of	09/702,647	10/31/00
	Division of	09/036,355	3/06/98
	Provisional	60/040,418	3/13/97

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Auburn University
Street of mailing address:: 309 Samford Hall
City of mailing address:: Auburn
State or Province of mailing address:: AL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 35849

RTA01/2149273v1